

## REQUEST FOR RECORD

(Public, Private, or Protected)

Curtis Koch, MBA, CGFM Clerk/Auditor Nina Cleere, JD GRAMA Coordinator

Requester: (identification required for private					r protected records)	
Address:						
City:		State:	Zip:	Telephone: (	)	
This request i	s made to the Dav	vis County		Telephone: (	(department)	
		sted:				
[Attach addition	al sheet if needed]					
Check all ap	plicable boxes [A	ttach suppor	tive document	is]		
[ ] [ ] [ ] [ ] [ ]	I am the person wh I am authorized to of attorney or relea I am the person to I am the person to I request an expedi	the requested egal guardian o submitted thave access the se. whom disclose whom disclose ted response expedited respected is for	I record(s). In of the subject the requested to the requeste sure must be resure must be reto my request to my request to some will benefit to the request to the record the request to the record the record the record the record the record the request the record the record the record the record the request the record	et of the requested record(s). It record(s). It records(s) by a proper a records(s) by a proper a reade pursuant to a lawful a record pursuant to a lawful because the public rather than a footaining information for	nd lawful executed power court order. legislative subpoena. a person	
Check applic	able boxes					
[]	I wish only to view or inspect the requested record(s).  I wish to obtain copies of the requested record(s) and agree to pay copy costs in an amount not exceeding \$ If estimated copy costs exceed that amount, I understand that I will be contacted before any copies are made for authorization to proceed.					
[]	I wish to obtain copies of the requested record(s) and request a waiver of copy costs on the basis that:					
Dated:	, 201					
				[Requester's s	ignature]	
Mailing Address: Davis County Goverr Attn: Nina Cleere PO Box 618 Farmington, UT 840	nment Clerk/Auditor 25		Contact In Email: GRA Phone: 801	AMA@co.davis.ut.us		

request.frm version: 4/11/16